

STATE OF NEVADA
GAMING CONTROL BOARD
DROP AND COUNT SCHEDULE
6.130.1(a)



SUBMIT TO

**TAX AND LICENSE DIVISION
PO BOX 8004
CARSON CITY, NV 89702-8004**

Account No., Name, Address, Zip Code

Please correct if in error

For Office Use Only

Batch
Number _____

Entry
Date _____

Effective Date: _____

- ☐ Annual Filing
☐ Amended Filing

NGC Regulation 6.130.1(a) provides that gaming revenue shall only be collected and counted at the times designated on the schedule previously submitted to the Board. This form is provided for the use of nonrestricted Group II locations only, for reporting drop and count times, and changes in such schedules. Any unscheduled drop or count must be reported in advance, in writing, (Fax: 775-687-5817 Carson City or 702-486-204 Las Vegas.)

COUNT AND REMOVAL TIMES:

**SOFT COUNT
(Games and Tables):**

COUNT	DAY/DATE	DROP BOX REMOVAL TIME*	COUNT TIME*
Graveyard Shift	_____	_____	_____
Day Shift	_____	_____	_____
Swing Shift	_____	_____	_____

**HARD COUNT
(Slot Machines):**

COUNT	DAY/DATE	DROP BOX REMOVAL TIME*	COUNT TIME*
Machines (Owned)	_____	_____	_____
	_____	_____	_____
Machines (Participation)	_____	_____	_____
	_____	_____	_____
Currency Acceptor	_____	_____	_____
	_____	_____	_____

*The box removal and count times provided must be specific and not shown as time ranges.

I, _____, certify and declare under the penalties of perjury that I am the _____ of the business named above; that this is a true, correct and complete report (Owner, Partner, President, Treasurer, Other - describe) to the best of my knowledge, information, and belief; and that this report is made with the knowledge and consent of all other individuals licensed.

Dated _____

Signed _____